



CHANGES TO ORIGINAL PROPOSED STUDY PROGRAMME

Student	Last name(s)	First name(s)	Date of birth	Nationality	Sex [M/F]	Study cycle	Field of education

LEARNING AGREEMENT MODIFICATIONS (to fill ONLY if appropriate)

Code (if any)	Component title at the Receiving Institution (as indicated in the course catalogue)	Deleted component [tick if applicable]	Added component [tick if applicable]	Number credits (specify if ECTS or other local credits)
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
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		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

COMMITMENT FOR CHANGES

Commitment	Name and position	Email	Date	Signature	Stamp
Student					
Responsible person at the Sending Institution	Santiago Forcada Deputy Director for International Relations	mobility.eseiaat@upc.edu			
Responsible person at the Receiving Institution					